3800-FM-BPNPSM0438 3/2012



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF POINT AND NON-POINT SOURCE MANAGEMENT

SUPPLEMENTAL REPORT SEWAGE SLUDGE / BIOSOLIDS PRODUCTION AND DISPOSAL

Facility Name: Punxsutawney Borough STP Municipality: Punxsutawney Borough Watershed: 17-D Cou			County: <u>Jefferson</u>		Year: No.: PA0020346 tion due 180 days prior to expiration expire on June 30, 2018					
	SE	WAGE SLUD	GE/BIOSOLIDS	PRODUCTION INFOR	MATION (Identify	each off-site remo	oval event and incineration e	vent)		
☐ Check	here if there wer	e no off-site r	emoval events o	during the month						
Date	Liquid Sewage Sludge/Biosolids Hauled Off-site			Dewatered Sewage Sludge/Biosolids Hauled Off-site			Sewage Sludge/Biosolids Dewatered and Incinerated On-site			
Date	Gallons	% Solids	Dry Tons	Tons Dewatered	% Solids	Dry Tons	Tons Dewatered	% Solids Dry Tons		
	+									
		TOTAL:			TOTAL:			TOTAL:		
		SEWAGE					ICIAL USE INFORMATION			
	Site Name	· ·	(identify all Si	tes where sewage slud	uge/biosolius or a	sn were alsposed	or land applied)			
	Site Name Iunicipality									
IV.	County									
DE	P Permit No.									
	e of Material*									
	Applied/Dispo									
	of Disposal/Use	!*								
	auler Name									
*See Instr	uctions for expla	nation								
information of my know	submitted. Based	d on my inquiry true, accurate a	of the person or pand complete. I a	persons who manage the s am aware that there are si	system or those perso	ns directly responsibl	designed to assure that qualified le for gathering the information, the ormation, including the possibility	e information subr	nitted is, to the best	
Pre	pared By:					Signature:				
	-				<u> </u>	Date:				
Title:				<u> </u>	<u></u>					



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF POINT AND NON-POINT SOURCE MANAGEMENT

CSO SUPPLEMENTAL REPORT MONTHLY INSPECTION REPORT

*See instructions for explanation. Comments	Facility Name: Punxsutawney Borough Municipality: Punxsutawney Borough Watershed: 17-D	STP County: <u>Jefferson</u>	Renewal app	nit No.: PA0020346 lication due 180 days prior to expiration rill expire on June 30, 2018	Year:
I certify under penalty of law that this document was prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. See 18 Pa. C.S. § 4904 (relating to unsworn falsification). Prepared By: Signature:	CSO Outfall No.	Outfall Location*	Discharge?*	Comments	
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	I certify under penalty of law that this conformation submitted. Based on my in best of my knowledge and belief, true,	nquiry of the person or persons who manage the syst accurate and complete. I am aware that there are si	em or those persons directly	responsible for gathering the information, the	information submitted is, to the
Title: Date:	Prepared By:		Signature:		
	Title:		Date:		



Prepared By:

Title:

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF POINT AND NON-POINT SOURCE MANAGEMENT

CSO SUPPLEMENTAL REPORT DETAILED OUTFALL REPORT

	DETAILED OUTFALL REPORT										
Facility Name: Punxsutawney Borough STP Municipality: Punxsutawney Borough Watershed: 17-D		County: Jefferson	Renewal	NPDES Permit No.: <u>PA0020346</u> Renewal application due <u>180 days</u> prior to expiration							
				This pern	nit will expire on June 30,						
Day	Identification*	Discharge Volume (MG)*	Duration (hrs)	Cause*	Precipitation (in)	Comments					
1											
2											
3											
4											
5											
6											
7 8											
9											
10											
11											
12											
13											
14											
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16											
17											
18 19											
20											
21											
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23											
24											
25											
26											
27											
28											
29 30											
31											
	tructions for explanation	n									
I certify usinformation	under penalty of law that ion submitted. Based on my knowledge and belie	at this document was preparent my inquiry of the person of	or persons who manage the syste ete. I am aware that there are sig	m or those persons directly r	esponsible for gathering the in	qualified personnel gather and evaluate the nformation, the information submitted is, to the g the possibility of fine and imprisonment for					

Signature:

Date:



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF POINT AND NON-POINT SOURCE MANAGEMENT

SUPPLEMENTAL REPORT HAULED IN RESIDUAL WASTES

	Punxsutawney	Borough STP	0-	t lefferen	Month: Year:					
Municipality: Watershed:	Punxsutawney 17-D	Borougn	Co	County: <u>Jefferson</u> NPDES Permit No.: <u>PA0020346</u> Renewal application due <u>180 days</u> prior to expiration This permit will expire on <u>June 30, 2018</u>						
	Volume Received	License Plate	Well Permit			Chemical Analysis				
Date	(gallons)	No.	No.	Generator	Address	State	Wastewater Type	(Yes/No)		
		+								
Total:			<u>.</u>			·				
information subm	nitted. Based on redge and belief, t	my inquiry of the per	rson or persons whomplete. I am awa	no manage the system or the are that there are significant	ccordance with a system designed to use persons directly responsible for op- penalties for submitting false information	gathering the information,	the information submitted	ed is, to the		
	Prepared By:				Signature:					
	Title:				Date:					

3800-FM-BPNPSM0440 3/2012



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF POINT AND NON-POINT SOURCE MANAGEMENT

NON-COMPLIANCE REPORTING FORM

Use this supplemental form to report all permit violations and any other non-compliance that may endanger health or the environment, in accordance with your permit. Complete all sections that apply. If you are reporting violations of permit limits, monitoring requirements or schedules that do not pose an immediate threat to health or the environment, you may attach this form to the Discharge Monitoring Report (DMR). Title 25, Pa. Code §§ 91.33 and 91.34 (regarding incidents causing or threatening pollution and activities utilizing pollutants, respectively), in part requires immediate notification by telephone to the Department of pollution incidents, remediation, and may require an additional report on the incident or plan of pollution prevention measures. If you are reporting other non-compliance events, and the reporting deadline does not coincide with your submission of the DMR, it should be submitted separately to the Department by the reporting deadline set forth in the permit. See instructions for more information.

your s	ubmission of the	he DMR, it should be s	ubmitted sepa	rately to	the Departme	ent by the repo	rting deadline se	t forth	in the permit. See i	nstructions to	r more informat	ion.
Facilit	y Name: P	unxsutawney Boroug	h STP				Month:			Year	:	
Munic	cipality: P	unxsutawney Boroug	h	County:	Jefferson		Permit	No.:	PA0020346			
	Violations	of Permit Effluent Li	mitations*									
	Date	Parameter	Permit Limit	Units	Statistical Code	Result	Units		Cause of Violation	on	Corrective A	Action Taken
	Sanitary Se	ewer Overflows and	Other Unaut	horized	Discharges*							
	Event Date	Substance Discharged	Locatio	n	Volume (gals)	Duration (hrs)	Receiving Waters	lı	mpact on Waters	Cause of	Discharge	Date DEP Notified
	☐ Sai	nit Violations* mple collection less from the comple type not in completion less from the completion in comp	liance with p	•	Expi	aın						
	☐ Vio☐ Oth	-	lule		Expl Expl	ain ain						
I certify information	y under penalty ation submitted. owledge and be	or law that this docume Based on my inquiry of the lief, true, accurate and concess. § 4904 (relating to use	nt was prepare e person or persomplete. I am	d under r sons who aware tha	my direction or manage the sys	supervision in a stem or those pe	accordance with a ersons directly resp	syste	m designed to assure le for gathering the infor	rmation, the info	ormation submitte	ed is, to the best of
		Prepared By:					Signature:					
		Title:					Date:	_				



COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF ENVIRONMENTAL PROTECTION BUREAU OF POINT AND NON-POINT SOURCE MANAGEMENT

SUPPLEMENTAL LABORATORY ACCREDITATION FORM¹

Permittee Name:	Punxsutawne	ey Borough							
Address:	301 East Ma	honing Street	Suite 1						
	Punxsutawne	ey, PA 15767							
	PERMIT N	IUMBER		MONITORING PERIOD Year/Month/Day					
	PA002	0346			то				
PARAMET	ΓER	ANALYS	SIS METHOD	LAB NAM	E	LAB ID NUME	BER ²		
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designed to assure the manage the system,	nat qualified person or those person and complete.	sonnel properly s directly respo	gather and evaluate nsible for gathering t	ere prepared under my control the information submitted the information, the information and penalties for submitting	 Based on my inquation submitted is, 	uiry of the person or to the best of my kn	persons who owledge and		
Name/Title Princ	cipal Executiv	ve Officer	Phone:	Sigr		al Executive Offic zed Agent	er or		
			Date:						

¹ Submit this form with the first Discharge Monitoring Report (DMR) or Annual Report, where sample results are submitted to the Department for compliance purposes. You do not need to send this form to the Department again UNLESS there has been a change to the lab(s), parameter(s) or method(s) of analysis.

² For parameter(s) covered under accreditation-by-rule, submit the lab's registration number in lieu of an accreditation number.